APPOINTMENT OF A CAMPAIGN TREASURER BY A CANDIDATE

FORM CTA

See CTA Instruction Guide for detailed instructions.				1 Total pages filed:	
2 CANDIDATE	MS/MRS/MR FIRST MI Mr. Joseph A.		MI	OFFICE USE ONLY	
NAME					
	Joe Ve	est	SUFFIX	Date Received	
3 CANDIDATE MAILING ADDRESS	ADDRESS /PO BOX: APT / SUITE #: 604 SW 19th Seminole TX 79360	сту;	STATE; ZIP CODE	Date Hand-delivered	or Postmarked
4 CANDIDATE PHONE	AREA CODE PHONE NUMBER	R	EXTENSION	Receipt#	Amount \$
	(432) 230-1083				
5 OFFICE HELD (if any)	Gaines County Sheriff			Date Imaged	
6 OFFICE SOUGHT (if known)	Gaines County Sheriff				
7 CAMPAIGN TREASURER NAME	Mr. Joseph	мі А.	Лое	Vest	SUFFIX
8 CAMPAIGN TREASURER STREET ADDRESS (residence or business)	STREET ADDRESS; 604 SW 19th Seminole TX 79360	APT / SUITE #;	CITY;	STATE;	ZIP CODE
9 CAMPAIGN TREASURER PHONE	AREA CODE PHONE NUMBER (432) 230-1083	R	EXTENSION		
10 CANDIDATE SIGNATURE	I am aware of the Nepo the Election Code. I am aware of the restri- from corporations and I	onsibility to fil	e timely reports a	s required by	title 15 of
	Signature of Candidate Date				ed
		GO TO PAGE	2	<u> </u>	*** ** ** *****************************